PTO/SB/21 (09-06)

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09/863,706

Application Number

TRANSMITTAL					Filing Date	Ma	May 22, 2001					
	FORM				First Named Inventor Gettemy, Shawn			nawn				
					Art Unit							
(to	(to be used for all correspondence after initial filing				Examiner Name	Nguyen, Jennifer T.						
Tota	Number of I	Pages in T	his Submission	16	Attorney Docket Numbe	r PAL	PALM-3650 (PALM.1020)					
	ENCLOSURES (Check all that apply)											
V			W.F. 111 W			an that ap		After A	Ilowance Communication to TC			
	Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority				Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revoca Change of Correspondence Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on	e Address	- Re	Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): equest for Continued Examination (RCE				
	Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53		TURE (OF APPLICANT, AT	ORNEY	, OR AG	SENT					
Firm N	ame				,		•					
Shemwell Mahame			ai LLP									
Signature /Zurvan Mahamedi/			/									
Printed name Zurvan Mahamedi,			Reg. N	o. 42,828								
Date December 14		mber 14, 2006	4, 2006			. No. 42,828						
CERTIFICATE OF TRANSMISSION/MAILING												
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Typed	Typed or printed name							Date				

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I		Application Number 09/8			33,706							
	TRAN	Filing Date		May 22, 2001								
	For FY	First Named Inventor Get			emy, Shawn							
Applicant cla	nims small entity sta	itus. See 37 (CFR 1 27	Examiner Name Nguye			n, Jennifer T.					
	I			Art Unit 2629								
TOTAL AMOUN	OF PAYMENT	(\$) 8	340.00	Attorney Docket No. PALM-36				PALM.10	20)			
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order None Other (please identify):												
Deposit Account Deposit Account Number: 50-1914 Deposit Account Name: Shemwell Mahamedi LLP												
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For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee												
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments												
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card												
information and authorization on PTO-2038.												
FEE CALCULA	ATION											
1. BASIC FILIN	IG, SEARCH, AN			2011 5550	EVA	AINIATION						
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Application 1			Fee (\$		Fee	<u>(\$)</u> Fee		<u>Fee</u>	s Paid (\$)			
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Design	200	100	100	50	130	0 6:	5					
Plant	200	100	300	150	16	0 80)					
Reissue	300	150	500	250	60	300)					
Provisional	200	100	0	0	(0 ()					
2. EXCESS CI						F	ee (\$)	Small Er Fee (\$				
Fee Description Each claim	over 20 (includin	g Reissues)				<u> </u>	50	25				
	ndent claim over				200	100						
Multiple de	endent claims	`	,				360	180				
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3. APPLICATION	ON SIZE FEE ation and drawin	gs avosad 10	O cheets of no	nar (avaludir	ag electro	sically file	d sean	ence or co	mnuter			
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sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)												
100 = / 50 = (round up to a whole number) x =												
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)												
Other (e.g., late filing surcharge): RCE Fee (790) + Additional claim fee (50, noted above) 840.00									840.00			
SUBMITTED BY												
Registration No. 42 929 Telephone 409 226 6640								236-6640				
	Zurvan Mahan	(Attorney/Agent	(Michino)// Igonity				Date December 14, 2006					

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.